



Information Sheet

“Difference between coaching - counselling – psychotherapy”

Dear Colleagues,

Clients and practitioners often confuse the three helping professions' professional competences and responsibilities: coaching, counselling, and psychotherapy. Such diffusion of professional boundaries is a source of stress for many professionals who take on clients beyond their competence to help. In turn, clients find it challenging to choose the most suitable specialist. Moreover, accordingly, they often receive low-quality services.

In this regard, WAPP considers it necessary to define the boundaries of responsibility of these professions to take them into account in the proposed educational standards and programs.

Coaching is a result oriented helping profession, a “partnering with clients in a thought-provoking and creative process that inspires them to maximize their personal and professional potential.” (ICF). Coaching uses the open questions as the primary intervention instead of interpretation.

Inquiry: the client is looking for activation for action, development of skills, performance improvement, learning, and clarification of goals.

Process: coaching accompanies the client in developing and testing new skills and adjusting goals to ensure optimal performance. It focusses on present to coach skills to build a successful future. The coaching refers to the past only to the extent that it is necessary to find resources and achieve the goals.

Level of difficulties/complains: coaching works with well-functioning individuals mainly on cognitive-behavioural level¹ and partially on the conflictual level² if

- 1) the conflict has no signs of the neurotic disorder³, or
- 2) the neurotic conflict does not relate directly to the topic of coaching, and

The coaching requires a high or medium level of integration of personality structure (primary capacities).

Contraindications: coaching does not involve working with psychopathology.

¹ Cognitive-behavioural level of difficulties/complains (“I do not know how ... I've never done this before”).

- client usually knows (conscious) and can describe the reasons for difficulties.
- client complains he/she gets the same unwanted results, by doing the same in similar repetitive situations. The situations are not very emotionally significant for the client; he/she is more upset by the very fact of failure.
- in countertransference, one experiences conscious and moderate, mostly an inspiring sense of cooperation.

² The level of conflicts (“I want this, yet at the same time I want something else”)

- client reacted disproportionately vividly, albeit understandable in context to external and inner conflicts of motives based on personal experience and fueled the belief (that certain events/actions threaten the satisfaction of particular needs or, conversely, give a chance to meet them.
- the client complains on strong and often unpleasant indescribable feelings, appearing over and over again in similar repetitive situations in different areas of life (fear of public speaking; fear of evaluation; guilt for dismissing employees sadness; mixed feelings and intense anxiety in negotiations, etc.)
- one experiences in countertransference quite conscious, repetitive and predictable feelings.

³ The conflict gains the quality of neurotic disorder if one of the unconscious conflictual motives becomes an existential necessity and focuses all experience and behaviour on this (those) motive(s). Such disorder manifests itself in trigger situations based on the conflict formed in childhood, repeated intra- and interpersonal emotional and behavioural reactions.



Psychological counselling is a helping profession, a service provided by a skilled professional counsellor to an individual, family, or group to improve wellbeing, alleviate distress, and enhance coping skills.

Psychological counselling usually focuses on

- assessment of the behaviours, reactions, attitudes, personality traits and capacities in order to understand their contribution to wellbeing and productivity, external and inner conflicts, emotional and conductive/ behavioural difficulties;
- exploring possible ways to develop capacities and resolve difficulties.

Inquiry: the client is looking for understanding the roots of immediate problems and behaviours, for resolutions of specific situations, relationship/family problems, and correction of certain behaviours

Process: psychodiagnostic, guidance, support, and education to help the client identify and find their solutions to current problems

Level of difficulties/complains psychological counselling can participate in diagnostic of all levels. Counselling interventions can only address cognitive-behavioural difficulties, relationship problems and partially inner conflicts if the client has no signs of a neurotic disorder (pathology).

Psychotherapy – is a healing profession, “the informed and intentional application of clinical methods and interpersonal stances derived from established psychological principles for the purpose of assisting people to modify their behaviors, cognitions, emotions, and/or other personal characteristics in directions that the participants deem desirable.” (APA)

Psychotherapy addresses the mental problems:

- that acquired qualities of disorder that meets the criteria for mental, behavioural or neurodevelopmental disorders,
- associated with inner conflicts, psychological traumas, and structural personality disorders.

Inquiry: the patient is looking for a reduction of mental or physical suffering, resolution of deep-seated emotional issues, trauma recovery, and developing skills for managing emotions or past issues

Process: structured, systematic therapy is employing the combination of psychodynamic, existential and behavioural interventions.

Level of difficulties/complains: all levels, yet mainly works with neurotic and structural disorders⁴.

⁴ Structural level. (“It is exhausting ... I do not know what is going on and what I want ... it is infuriating! ...”).

- Due to the limited availability of poorly developed primary (structural) capacities, a client cannot endure, understand and use his/her own emotions, motives, reactions, and perceives them as a natural and unchanging part of his personality.
- the client or his/her co-workers report disproportionate emotional outbursts in a wide variety of often calm situations that have nothing to do with each other (does not have any pattern). Affects and impulses of the client and everyone who comes in contact with him/her are robust, incomprehensible and charged with anger, fear or anxiety. The story of such a client is emotionally empty and formal. He/she describes rather actions than inner motives. Own feelings and experiences are often confused with the feelings and experiences of others. A person does not understand the connection between emotions, decisions and actions.

In countertransference, one experience rapidly changing, difficult to describe feelings and impulses, often persisting for a long time after the client has left. Feelings are so strong and uncontrollable that even if it is joy, it is still unpleasant or painful because of its strength and obsession.